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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS	-	
Case number (if known)	Chapter you are filing under:	
	■ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	rt 1: Identify Yourself					
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		Joint Case):	
1.	Your full name					
	Write the name that is or your government-issued picture identification (for example, your driver's license or passport).	First name	First name Middle name			
	Bring your picture identification to your meeting with the trustee	Hansen Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)		
2.	All other names you ha					
	Include your married or maiden names.					
3.	Only the last 4 digits o your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-2617				

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Case number (if known) Debtor 1 Michael W Hansen

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and		■ I have not used any business name or EINs. Business name(s)	☐ I have not used any business name or EINs. Business name(s)			
	doing business as names	EINs	EINs			
5.	Where you live	538 Scotts Army Trail	If Debtor 2 lives at a different address:			
		Belvidere, IL 61008 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code			
		Boone County	County			
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
6. Why you are choosing this district to file for bankruptcy		Check one: Over the last 180 days before filing this petition,	Check one: Over the last 180 days before filing this petition, I			
		I have lived in this district longer than in any other district.	have lived in this district longer than in any other district.			
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)			

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Document Case number (if known) Debtor 1 Michael W Hansen

7.	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.						
	choosing to file under	■ C	hapter 7					
		□ с	hapter 11					
		□ с	hapter 12					
		□ C	hapter 13					
8.	How you will pay the fee		about how yo	u may pay. Ty _l attorney is sub	pically, if you are paying the fee yo	with the clerk's office in your local court for more det urself, you may pay with cash, cashier's check, or mo alf, your attorney may pay with a credit card or check w		
					stallments. If you choose this option to (Official Form 103A).	n, sign and attach the Application for Individuals to Pa		
			but is not req applies to you	uired to, waive ır family size a	your fee, and may do so only if yo nd you are unable to pay the fee ir	n only if you are filing for Chapter 7. By law, a judge m ur income is less than 150% of the official poverty line installments). If you choose this option, you must fill of ial Form 103B) and file it with your petition.		
9.	Have you filed for	■ No						
	bankruptcy within the last 8 years?	☐ Ye						
	iast o years?	⊔ Ye			When	Coop number		
			District District		When	Case number Case number		
					when	Case number Case number		
			District		when	Case number		
10.	Are any bankruptcy cases pending or being	■ No)					
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Ye	es.					
			Debtor			Relationship to you		
			District		When	Case number, if known		
			Debtor			Relationship to you		
			District		When	Case number, if known		
11.	Do you rent your residence?	■ No	Go to I	ne 12.				
	residence :	☐ Ye	es. Has yo	ur landlord obt	ained an eviction judgment agains	t you and do you want to stay in your residence?		
				No. Go to line	12.			
				Yes Fill out Ir	nitial Statement About an Eviction.	Judgment Against You (Form 101A) and file it with this		

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Debtor 1 Michael W Hansen Page 4 01 52 Case number (if known)

art	3: Report About Any Bu	sinesses	You Own	as a Sole Proprietor			
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	art 4.			
		☐ Yes.	Name	and location of business			
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name				
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	r, Street, City, State & ZIP C	Code		
	it to this petition.		Check	the appropriate box to descr	ibe your business:		
				Health Care Business (as d	efined in 11 U.S.C. § 101(27A))		
				Single Asset Real Estate (a	s defined in 11 U.S.C. § 101(51B))		
				Stockbroker (as defined in 1	11 U.S.C. § 101(53A))		
				Commodity Broker (as defir	ned in 11 U.S.C. § 101(6))		
				None of the above			
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadlines operation	u are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate flines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of ations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure U.S.C. 1116(1)(B).				
	For a definition of small	No.	No. I am not filing under Chapter 11.				
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.				
		☐ Yes.	I am fi	ng under Chapter 11 and I a	m a small business debtor according to the definition in the Bankruptcy Code.		
art	4: Report if You Own or	Have Any	Hazardo	s Property or Any Propert	y That Needs Immediate Attention		
4.	Do you own or have any	■ No.					
	property that poses or is alleged to pose a threat of imminent and	☐ Yes.	What is t	e hazard?			
	identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?			ate attention is hy is it needed?			
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	he property?	Street, City, State & Zip Code		
				ramber,	5.105, 5.11, 5.11.10 to 2.1p 6000		

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Debtor 1 Michael W Hansen

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

Part 5:

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

Case number (if known)

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Document Page 6 of 52 Case number (if known) Debtor 1 Michael W Hansen Part 6: **Answer These Questions for Reporting Purposes** 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." you have? ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. ☐ No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses ■ No are paid that funds will be available for ☐ Yes distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5001-10,000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ☐ More than 100,000 **1**00-199 **200-999** How much do you **\$0 - \$50,000** □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your assets to □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500.001 - \$1 million 20. How much do you □ \$0 - \$50,000 □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your liabilities □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion to be? **\$100,001 - \$500,000** □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,000,001 - \$500 million ■ More than \$50 billion □ \$500,001 - \$1 million Sign Below Part 7: For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Michael W Hansen Michael W Hansen Signature of Debtor 2

Executed on

MM / DD / YYYY

Signature of Debtor 1

Executed on July 11, 2016

MM / DD / YYYY

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Debtor 1 Michael W Hansen Page 7 01 52 Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Daniel /	A. Springer	Date	July 11, 2016	
	Attorney for Debtor		MM / DD / YYYY	
Daniel A. S	Springer			
Printed name				
Springer L	aw Firm			
Firm name				
2222 E Sta	te St			
Suite 107				
Rockford,	IL 61104			
Number, Street,	City, State & ZIP Code			
Contact phone	815.312.4725	Email address	dspringerlaw@gmail.com	
6314059				
Bar number & St	ate			

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		Docume	ent Page 8 of 5	2	
Fill in this inforn	nation to identify your	case:			
Debtor 1	Michael W Hanse	n			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bar	nkruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number					☐ Check if this is an amended filing
] ag

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Par	Summarize Your Assets		
		Your a	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	130,788.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	5,643.67
	1c. Copy line 63, Total of all property on Schedule A/B	\$	136,431.67
Par	2: Summarize Your Liabilities		
			iabilities It you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	168,833.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	1,620.30
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	15,310.57
	Your total liabilities	\$	185,763.87
Par	3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	2,740.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	2,716.00
Par	4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? ☐ No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur other sc	hedules.
7.	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a	a personal	. family, or

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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Case number (if known) Debtor 1 Michael W Hansen

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

2,170.00 \$

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total o	laim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	1,620.30
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	1,620.30

	С	ase 16-81657	Doc 1		07/11/16 ument	Entered 07/11/16	15:23:03	Desc	Main		
Fill	in this info	rmation to identify yo	our case and th	his filing:	:						
Deb	otor 1	Michael W Har		e Name		Last Name					
	otor 2 use, if filing)	First Name	Middle	e Name		Last Name					
Unit	ted States B	ankruptcy Court for the	e: NORTHER	RN DISTR	RICT OF ILLIN	IOIS					
Cas	se number					-			Check if this is an amended filing		
_		orm 106A/B le A/B: Pro	nerty						12/15		
hink nfor nsv	it fits best. mation. If mover every que	Be as complete and acc re space is needed, atta estion.	curate as possib ach a separate s	le. If two r heet to th	married people is form. On the	n asset fits in more than one c are filing together, both are ed top of any additional pages, v n or Have an Interest In	qually responsibl	e for supply	ying correct		
	Yes. Where	is the property?									
1.1				What i	is the property	? Check all that apply					
		ts Army Trail s, if available, or other descrip	tion		Duplex or multi-unit building Cr			Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.			
	Belvider	e IL 6	61008-0000		Manufactured Land	or mobile home	Current value of entire property?		urrent value of the ortion you own?		
	City	State	ZIP Code	Uho h		in the property? Check one		ure of your ple, tenancy	\$130,788.00 ownership interest y by the entireties, or		
	Boone			_	Debtor 1 only Debtor 2 only	-					
	County				Debtor 1 and Debtor 1 and Debtor 1 and Debtor 1	the debtors and another ou wish to add about this item,	(see instruction		nity property		

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here......>>

\$130,788.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

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Case number (if known) Document Debtor 1 Michael W Hansen 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles ☐ No Yes Do not deduct secured claims or exemptions. Put Mercedes Make: Who has an interest in the property? Check one the amount of any secured claims on Schedule D: C280 Creditors Who Have Claims Secured by Property. Model: Debtor 1 only 2007 Year: Debtor 2 only Current value of the Current value of the Approximate mileage: 147,000 Debtor 1 and Debtor 2 only entire property? portion you own? Other information: At least one of the debtors and another Car \$3,864.00 \$3,864.00 ☐ Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ■ No ☐ Yes 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$3.864.00 pages you have attached for Part 2. Write that number here...... Part 3: Describe Your Personal and Household Items Do you own or have any legal or equitable interest in any of the following items? Current value of the portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware □ No Yes. Describe..... Living Room Furniture, Bedroom Set, Dishes & Cookware \$700.00 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games ☐ No Yes. Describe..... ΤV \$200.00 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles □ No Yes. Describe..... **Compact Discs** \$50.00 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ■ No ☐ Yes. Describe.....

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Case number (if known) Document Debtor 1 Michael W Hansen 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ■ No ☐ Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories ☐ No Yes. Describe..... \$400.00 **Used Clothing** 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver ☐ Yes. Describe..... 13. Non-farm animals Examples: Dogs, cats, birds, horses ☐ No Yes. Describe..... \$100.00 Two Dogs 14. Any other personal and household items you did not already list, including any health aids you did not list ■ No ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$1,450,00 for Part 3. Write that number here Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition □ No Cash \$5.00 Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. □ No Institution name: ■ Yes..... **Bank of America** \$84.67 17.1. Checking 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts No

Institution or issuer name:

☐ Yes.....

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Debt	or 1 Michael V	V Hansen	Document	- age 15 of 5	Case number (if known)	
j	oint venture	d stock and interests in inc	corporated and uninc	orporated business	ses, including an interest in	an LLC, partnership, and
	No Yes. Give specific	c information about them Name of entity:			% of ownership:	
I	Negotiable instrume Non-negotiable inst No	orporate bonds and other rents include personal checks truments are those you cannot	, cashiers' checks, pro	missory notes, and m	noney orders.	
	res. Give specific	information about them Issuer name:				
	No	s in IRA, ERISA, Keogh, 4010	(k), 403(b), thrift saving	gs accounts, or other	pension or profit-sharing plan	ns
	Yes. List each acc	count separately. Type of account:	Institution	name:		
		used deposits you have mad			from a company ecommunications companies	, or others
	Yes		Institution	name or individual:		
		Utility	COMED			\$240.00
26 	S U.S.C. §§ 530(b)(No Yes rusts, equitable o No	(1), 529A(b), and 529(b)(1). Institution name and descr	iption. Separately file t	he records of any inte	ualified state tuition progra erests.11 U.S.C. § 521(c): and rights or powers exerci	
	Examples: Internet No	s, trademarks, trade secret domain names, websites, pro c information about them	s, and other intellect oceeds from royalties a	ual property and licensing agreem	ents	
	Examples: Building No	es, and other general intan permits, exclusive licenses, c information about them		n holdings, liquor lice	enses, professional licenses	
Mon	ey or property ow	ed to you?				Current value of the portion you own? Do not deduct secured claims or exemptions.
=	ax refunds owed No Yes. Give specific	to you information about them, incl	luding whether you alre	eady filed the returns	and the tax years	
	No		sal support, child supp	ort, maintenance, div	vorce settlement, property set	ttlement
	Yes. Give specific al Form 106A/B	information	Schedule A/B: I	Property		page

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Case number (if known)

Document Debtor 1 Michael W Hansen

30.	Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else		
	■ No □ Yes. Give specific information		
31.	Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HS/	A); credit, homeowner's, or renter's insurar	nce
	■ No Yes. Name the insurance company of each policy and list its value. Company name:	Beneficiary:	Surrender or refund value:
32.	Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insura someone has died. No	ance policy, or are currently entitled to rece	eive property because
	☐ Yes. Give specific information		
	Claims against third parties, whether or not you have filed a lawsuit of Examples: Accidents, employment disputes, insurance claims, or rights to ■ No □ Yes. Describe each claim		
	Other contingent and unliquidated claims of every nature, including co ■ No □ Yes. Describe each claim	ounterclaims of the debtor and rights to	set off claims
	Any financial assets you did not already list		
	■ No □ Yes. Give specific information		
36	. Add the dollar value of all of your entries from Part 4, including any of for Part 4. Write that number here		\$329.67
Pa	rt 5: Describe Any Business-Related Property You Own or Have an Interest In. L	ist any real estate in Part 1.	
١	Do you own or have any legal or equitable interest in any business-related proper No. Go to Part 6. Yes. Go to line 38.	erty?	
•	1 res. 00 to line 50.		
Pa	Describe Any Farm- and Commercial Fishing-Related Property You Own or If you own or have an interest in farmland, list it in Part 1.	Have an Interest In.	
46.	Do you own or have any legal or equitable interest in any farm- or com No. Go to Part 7.	nmercial fishing-related property?	
	☐ Yes. Go to line 47.		
Pa	Describe All Property You Own or Have an Interest in That You Did No	t List Above	
	Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership		
	■ No □ Yes. Give specific information		
54	. Add the dollar value of all of your entries from Part 7. Write that num	ber here	\$0.00

Official Form 106A/B Schedule A/B: Property page 5

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Case number (if known) Document Debtor 1 Michael W Hansen

Part	8: List the Totals of Each Part of this Form			
55.	Part 1: Total real estate, line 2			\$130,788.00
56.	Part 2: Total vehicles, line 5	\$3,864.00		
57.	Part 3: Total personal and household items, line 15	\$1,450.00		
58.	Part 4: Total financial assets, line 36	\$329.67		
59.	Part 5: Total business-related property, line 45	\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54 +	\$0.00		
62.	Total personal property. Add lines 56 through 61	\$5,643.67	Copy personal property total	\$5,643.67
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$136,431.67

Official Form 106A/B Schedule A/B: Property page 6 Case 16-81657 Doc 1 Filed 07/11/16 Entered 07/11/16 15:23:03 Desc Main

	I A A A H I II .	III FAUE IOOL	1/	
mation to identify your	case:			
Michael W Hanse	n			
First Name	Middle Name	Last Name		
First Name	Middle Name	Last Name		
ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
				Check if this is an amended filing
	Michael W Hanse First Name	Michael W Hansen First Name Middle Name First Name Middle Name	Michael W Hansen First Name Middle Name Last Name First Name Middle Name Last Name	Michael W Hansen First Name Middle Name Last Name First Name Middle Name Last Name

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
538 Scotts Army Trail Belvidere, IL 61008 Boone County	\$130,788.00		\$15,000.00	735 ILCS 5/12-901
Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit	
2007 Mercedes C280 147,000 miles Car	\$3,864.00		\$2,400.00	735 ILCS 5/12-1001(c)
Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit	
Living Room Furniture, Bedroom Set,	\$700.00		\$700.00	735 ILCS 5/12-1001(b)
Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit	
TV Line from Schedule A/B: 7.1	\$200.00		\$200.00	735 ILCS 5/12-1001(b)
Line Holli Schedule AVD. 7.1			100% of fair market value, up to any applicable statutory limit	
Compact Discs Line from Schedule A/B: 8.1	\$50.00		\$50.00	735 ILCS 5/12-1001(a)
Eine nem Genedale A/D. VII			100% of fair market value, up to any applicable statutory limit	

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				,	
	rief description of the property and line on chedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim		Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
	sed Clothing ne from Schedule A/B: 11.1	\$400.00		\$400.00	735 ILCS 5/12-1001(a)
	The Hoth Generalic PAB.			100% of fair market value, up to any applicable statutory limit	
	wo Dogs ne from <i>Schedule A/B</i> : 13.1	\$100.00		\$100.00	735 ILCS 5/12-1001(b)
	THE HOLL SCHEUDIE AND. 10.1			100% of fair market value, up to any applicable statutory limit	
	tility: COMED ne from Schedule A/B: 22.1	\$240.00		\$240.00	735 ILCS 5/12-1001(b)
LI	THE HOTH SCHEUUIE PAB. 22.1			100% of fair market value, up to any applicable statutory limit	
		3 years after that for ca	ases fi	•	,
	□ No □ Yes				

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	Document Pa	age 18 of 52		
Fill in this information to identify you	ur case:			
Debtor 1 Michael W Hans	son			
First Name		t Name	_	
Debtor 2				
(Spouse if, filing) First Name	Middle Name Las	t Name	-	
	NORTHERN DISTRICT OF HILINOI	0		
United States Bankruptcy Court for the	: NORTHERN DISTRICT OF ILLINOI	5	_	
Case number				
(if known)			☐ Check	if this is an
				ded filing
				ŭ
Official Form 106D				
Schedule D: Creditors	s Who Have Claims Se	cured by Propert	hv.	12/15
Schedule D. Creditors	Wild Have Claims Se	cured by Propert	. y	12/13
	If two married people are filing together, bo			
is needed, copy the Additional Page, fill it number (if known).	out, number the entries, and attach it to thi	s form. On the top of any addition	onal pages, write your na	me and case
1. Do any creditors have claims secured b	www.nronortw2			
`				
☐ No. Check this box and submit t	this form to the court with your other sche	edules. You have nothing else	to report on this form.	
Yes. Fill in all of the information	below.			
Part 1: List All Secured Claims				
	more then one coursed claim list the are ditor.	Column A	Column B	Column C
	more than one secured claim, list the creditors a particular claim, list the other creditors in Page 1		Value of collateral	Unsecured
much as possible, list the claims in alphabet		Do not deduct the	that supports this	portion
2.1 BMW Financial	Describe the property that secures the of	value of collateral. aim: \$5,943.00	claim \$3,864.00	If any \$2,079.00
Creditor's Name	Describe the property that secures the cl		\$3,004.00	\$2,079.00
ordator o Name	2007 Mercedes C280 147,000 mi Car	ies		
	Cai			
PO BOX 3608	As of the date you file, the claim is: Check	all that		
Dublin, OH 43016	apply. Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated			
rambor, ender, end, ende a zip edae	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
■ Debtor 1 only	■ An agreement you made (such as mortg	ago or socured		
Debtor 2 only	car loan)	age or secured		
Debtor 1 and Debtor 2 only	Statutory lian (quah as tay lian machani	o'o lion)		
At least one of the debtors and another	☐ Statutory lien (such as tax lien, mechanic ☐ Judgment lien from a lawsuit	os lien)		
☐ Check if this claim relates to a	Other (including a right to offset)			
community debt	Other (including a right to onset)			
•				
Date debt was incurred 09/2010	Last 4 digits of account number			
2.2 Nationstar Mortgage LLC	Describe the property that secures the cl	aim: \$162,890.00	\$130,788.00	\$32,102.00
Creditor's Name	538 Scotts Army Trail Belvidere	, IL		
	61008 Boone County			
8950 Cypress Waters	As of the date you file, the claim is: Check	all that		
Blvd.	apply.			
Coppell, TX 75019	Contingent			
Number, Street, City, State & Zip Code	Unliquidated			
W	Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	An agreement you made (such as mortg	age or secured		
Debtor 2 only	car loan)			
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic	c's lien)		
At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a	Other (including a right to offset)			
community debt				
Date debt was incurred 02/2015	Last A digits of account number			

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Debtor 1	Michael W Hansen			Case number (if know)	
	First Name	Middle Name	Last Name		

Add the dollar value of your entries in Column A on this page. Write that number here: \$168,833.00

If this is the last page of your form, add the dollar value totals from all pages.

Write that number here: \$168,833.00

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Official Form 106D

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			Do	cument	Page 20 of !	52	-	
Fil	l in this informat	ion to identify your	case:					
De	ebtor 1	Michael W Hanse	n					
	_	First Name	Middle Name		Last Name			
	ebtor 2							
(Sp	ouse if, filing)	First Name	Middle Name		Last Name			
Un	ited States Bankr	ruptcy Court for the:	NORTHERN DI	STRICT OF ILLII	NOIS			
C-	ise number							
	nown)						☐ Check	t if this is an
							ameno	ded filing
~	· · · · · · · · · · · · · · · · · · ·	400E/E						
	ficial Form							40/45
		: Creditors W						12/15
Sch Sch left. nan	edule G: Executory edule D: Creditors Attach the Continu ne and case numbe	ts or unexpired leases y Contracts and Unexp Who Have Claims Sec uation Page to this page er (if known). f Your PRIORITY Ur	ired Leases (Officia ured by Property. It e. If you have no ir	al Form 106G). Do f more space is ne	not include any cre eded, copy the Part	ditors with partially styou need, fill it out,	secured claims that a number the entries i	are listed in in the boxes on the
1.	Do any creditors	have priority unsecure	d claims against yo	ou?				
	☐ No. Go to Part	2.						
	Yes.							
2.	identify what type of possible, list the classible part 1. If more than	iority unsecured claims of claim it is. If a claim ha aims in alphabetical orde n one creditor holds a pa n of each type of claim, s	is both priority and ner according to the cirticular claim, list the	onpriority amounts reditor's name. If you e other creditors in l	, list that claim here a ou have more than tw Part 3.	and show both priority a	and nonpriority amour	nts. As much as
	7					• • • • • •	amount	amount
2.1	IRS Priority Credit	or's Name	Last 4	digits of account	number	\$1,620.30	\$1,620.30	\$0.00
	Centralize PO Box 73	d Insolvency Ope		was the debt incu	2013-20)14	-	
		et City State Zlp Code		the date you file, t	he claim is: Check a	all that apply		
	Who incurred th	e debt? Check one.	☐ Co	ntingent				
	Debtor 1 only		☐ Un	liquidated				
	Debtor 2 only		☐ Dis	sputed				
	Debtor 1 and	Debtor 2 only	Туре	of PRIORITY unse	cured claim:			
	☐ At least one of	of the debtors and another	er 🗖 Do	mestic support obli	gations			
	☐ Check if this	claim is for a commu	nity debt	xes and certain oth	er debts you owe the	government		
	Is the claim sub		_		ersonal injury while yo	_		
	■ No		□ Otl	ner. Specify				
	☐ Yes				Debt			-
Pa	rt 2: List All o	f Your NONPRIORIT	Y Unsecured Cla	nime				
		have nonpriority unsec						
	_ '	nothing to report in this p	_	•	our other schedules.			
	Yes.							
4.	unsecured claim, li	onpriority unsecured clist the creditor separately nolds a particular claim, i	for each claim. For	each claim listed, i	dentify what type of o	claim it is. Do not list cl	aims already included	I in Part 1. If more

Total claim

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Debtor 1 Michael W Hansen Case number (if know) 4.1 \$1,132.00 Advance America Last 4 digits of account number Nonpriority Creditor's Name Attn: Bankrutcy Dept When was the debt incurred? 05/2016 1746 South State Street Belvidere, IL 61008 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts No ☐ Yes **Personal Loan** Other. Specify 4.2 AT&T Mobility Last 4 digits of account number \$1,912.00 Nonpriority Creditor's Name Attn: Bankruptcy Dept. When was the debt incurred? 08/2012 PO Box 536216 Atlanta, GA 30353-6216 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Utilities** Other. Specify 4.3 **Citizens Finance** \$4,195.00 Last 4 digits of account number Nonpriority Creditor's Name 06/2010 Attn: Bankruptcy Dept. When was the debt incurred? 6457 N 2nd St Loves Park, IL 61111 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Repossesion

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Debtor 1 Michael W Hansen Case number (if know) 4.4 \$406.00 Comcast Last 4 digits of account number Nonpriority Creditor's Name Attn: Bankruptcy Dept. When was the debt incurred? 02/2012 PO Box 3005 Southeastern, PA 19398 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts No Utilities ☐ Yes Other. Specify 4.5 **Dish Network LLC** Last 4 digits of account number \$54.00 Nonpriority Creditor's Name When was the debt incurred? 07/2015 Attn: Bankruptcy Dept. 9601 S Meridian Blvd Englewood, CO 80112-5905 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Utilities** Other. Specify 4.6 **First Premier Bank** \$554.00 Last 4 digits of account number Nonpriority Creditor's Name 06/2008 Attn: Bankruptcy Dept. When was the debt incurred? 3820 N Louise Ave Sioux Falls, SD 57107 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit Card Purchases ☐ Yes

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Michael W Hansen	Case number (if know)	
IGS Energy/ Recovery One Nonpriority Creditor's Name	Last 4 digits of account number	\$583.00
5100 ParkCenter Ave Dublin, OH 43017	When was the debt incurred? 05/2015	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
ebt s the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No No	☐ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other. Specify Collections	
ifeline Abmbulance	Last 4 digits of account number	\$500.0
Nonpriority Creditor's Name 318 Roxbury Road Rockford, IL 61107	When was the debt incurred? 01/2016	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
/ho incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
$\operatorname{\square}$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	Student loans	
ebt s the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	\square Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other. Specify Medica Debt	
Nicor Gas	Last 4 digits of account number	\$520.57
Nonpriority Creditor's Name P.O. Box 2020 Aurora, IL 60507	When was the debt incurred? 04/2016	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
lebt s the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	\square Debts to pension or profit-sharing plans, and other similar debts	
□Yes	■ Other. Specify Utilities	

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Document Page 24 of 52 Debtor 1 Michael W Hansen Case number (if know) 4.1 **OSF St. Anthony Med Center** \$2,076.00 Last 4 digits of account number 0 Nonpriority Creditor's Name Attn: Bankruptcy Dept. When was the debt incurred? 05/2012 5510 East State St. Rockford, IL 61108-2381 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Medical Debt 4.1 **Rockford Anesthesiologists** \$1,246.00 Last 4 digits of account number Nonpriority Creditor's Name PO Box 4569 05/2012 When was the debt incurred? Rockford, IL 61110 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Medical Debt ☐ Yes 4.1 **Sprint Nextel** \$502.00 Last 4 digits of account number Nonpriority Creditor's Name Attn: Bankruptcy Dept. When was the debt incurred? 01/2016 6100 Corporate Blvd Suite 250 Baton Rouge, LA 70808 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not

■ No
□ Yes

■ Other. Specify Utilities

report as priority claims

lacksquare Debts to pension or profit-sharing plans, and other similar debts

Is the claim subject to offset?

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Debtor	1 Michael W Hansen	Case number (if know)	
4.1	Superior Ambulance Service		\$250.00
3	Superior Ambulance Service Nonpriority Creditor's Name	Last 4 digits of account number	\$250.00
	PO BOX 1407	When was the debt incurred? 06/2016	
	Elmhurst, IL 60126		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	\square Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Medical Debt	
4.1	O - 11 1 A - 1 1 1 1 1 1 1 1 1		40.40.00
4	Swedish American Hospital	Last 4 digits of account number	\$640.00
	Nonpriority Creditor's Name Attn: Bankruptcy Dept.	When was the debt incurred? 06/2016	
	PO Box 950	00/2010	
	Waukegan, IL 60085	_	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	\square Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Medical Debt	
4.1	Swedish American Hospital		\$740.00
5	Nonpriority Creditor's Name	Last 4 digits of account number	Ψ1 40.00
	Attn: Bankruptcy Dept.	When was the debt incurred? 05/2016	
	PO Box 950		
	Waukegan, IL 60085	- As a full a large of the districts of the large of	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	_		
	Debtor 1 only	Contingent	
	Debtor 2 only	Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	\square Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	

Part 3: List Others to Be Notified About a Debt That You Already Listed

■ Other. Specify Medical Debt

☐ Yes

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

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Debtor 1 Michael W Hansen		Case number (if know)		
Name and Address	On which entry in Part 1 or Part 2	did you list the original creditor?		
Afni	Line 4.5 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims		
Attn: Bankruptcy Dept. PO Box 3097 Bloomington, IL 61702-3097		■ Part 2: Creditors with Nonpriority Unsecured Claims		
2.001gtc, 12 017 02 0007	Last 4 digits of account number			
Name and Address	On which entry in Part 1 or Part 2	did you list the original creditor?		
Creditors Protection Service	Line 4.11 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims		
Attn: Bankruptcy Dept. PO Box 4115 Rockford, IL 61101		■ Part 2: Creditors with Nonpriority Unsecured Claims		
Rockiola, IL 01101	Last 4 digits of account number			
Name and Address	On which entry in Part 1 or Part 2 did you list the original creditor?			
Enhanced Recovery Company	Line 4.12 of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claims		
Attn: Bankruptcy Dept. PO Box 57547		Part 2: Creditors with Nonpriority Unsecured Claims		
Jacksonville, FL 32241				
	Last 4 digits of account number			
Name and Address	On which entry in Part 1 or Part 2	did you list the original creditor?		
EOS CCA	Line 4.2 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims		
PO BOX 981008 Boston, MA 02298		■ Part 2: Creditors with Nonpriority Unsecured Claims		
Boston, Mr. 02200	Last 4 digits of account number			
Name and Address	On which entry in Part 1 or Part 2	did you list the original creditor?		
Rockford Mercantile Agency	Line 4.10 of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claims		
Attn: BAnkruptcy Dept. PO Box 5847		Part 2: Creditors with Nonpriority Unsecured Claims		
Rockford, IL 61125				
•	Last 4 digits of account number			

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Т	otal Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims					
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	1,620.30
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	1,620.30
				Т	otal Claim
Total	6f.	Student loans	6f.	\$	0.00
claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	, , ,	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	15,310.57
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	15,310.57

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Fill in this infor	rmation to identify your	case:		
Debtor 1	Michael W Hanse	en		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS	
Case number				– 0. 1.77.
(if known)				☐ Check if this is an

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	r company with Name, Number	h whom you have the er, Street, City, State and ZIP C	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.3					
	Name				_
	Number	Street			
	City		State	ZIP Code	_
2.4	•				
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.5					
	Name				_
	Number	Street			_
	City		State	ZIP Code	<u> </u>
	٠,		3. 3	0000	

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		Documer	<u>nt Page 28 of !</u>	<u>52 </u>
Fill in this info	ormation to identify your	case:		
Debtor 1	Michael W Hanse	'n		
20210	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States I	Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				☐ Check if this is an amended filing
Official F	orm 106H			
		obtoro		
Schedui	e H: Your Cod	eptors		12/15
1. Do you ☐ No ☐ Yes 2. Within the Arizona, Co ☐ No. Go	have any codebtors? (If the last 8 years, have you alifornia, Idaho, Louisiana to line 3.	, Nevada, New Mexico, Pue	p erty state or territory? rto Rico, Texas, Washingt	(Community property states and territories include
☐ Yes. Die	d your spouse, former spo	use, or legal equivalent live	with you at the time?	
in line 2 a	gain as a codebtor only i D), Schedule E/F (Officia	f that person is a guarant	or or cosigner. Make sur	your spouse is filing with you. List the person shown re you have listed the creditor on Schedule D (Official s). Use Schedule D, Schedule E/F, or Schedule G to fil
	umn 1: Your codebtor , Number, Street, City, State and Z	IP Code		Column 2: The creditor to whom you owe the debt Check all schedules that apply:
292	elia Hansen 4 Rural Street ekford, IL 61107			☐ Schedule D, line Schedule E/F, line4.3 ☐ Schedule G Citizens Finance

Schedule H: Your Codebtors

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						•			
	in this information to identify btor 1 Michae	your case: el W Hansen							
		er w mansen			_				
	btor 2				_				
Uni	ited States Bankruptcy Court	for the: NORTHERN DISTRI	CT OF ILLINOIS		_				
	se number		_			Check if this is	s:		
(If Ki	nown)					☐ An amend			
_						A supplem		ng postpetition ollowing date:	
<u>O</u>	fficial Form 106l					MM / DD/	YYYY		
S	chedule I: Your	Income							12/1
atta		nd your spouse is not filing w form. On the top of any addit ment				I case number (if	known). A		
			☐ Employed					iiiig spouse	
	If you have more than one jattach a separate page with information about additiona	Employment status	■ Not employed			□ Emp	employed		
	employers.	Occupation							
	Include part-time, seasonal self-employed work.	, or Employer's name							
	Occupation may include stu or homemaker, if it applies.								
		How long employed t	there?						
Pai	rt 2: Give Details Abou	ut Monthly Income							
	imate monthly income as of use unless you are separated	the date you file this form. If	you have nothing to r	eport for	any	line, write \$0 in the	e space. In	clude your no	n-filing
	ou or your non-filing spouse have space, attach a separate sh	ave more than one employer, c neet to this form.	ombine the informatio	n for all e	emplo	oyers for that pers	on on the I	ines below. If	you need
						For Debtor 1		ebtor 2 or ing spouse	
2.		s, salary, and commissions (benthly, calculate what the month		2.	\$	0.00	\$	N/A	
3.	Estimate and list monthly	overtime pay.		3.	+\$	0.00	+\$	N/A	
4.	Calculate gross Income.	Add line 2 + line 3.		4.	\$	0.00	\$	N/A	

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Deb	tor 1	Michael W Hansen	-	C	ase number (if k	nown)				
					For Debtor 1			Debtor filing s	2 or spouse	
	Cop	by line 4 here	4.	;	\$	0.00	\$		N/A	<u></u>
5.	List	all payroll deductions:								
	5a.	Tax, Medicare, and Social Security deductions	5a.	. 9	\$	0.00	\$		N/A	
	5b.	Mandatory contributions for retirement plans	5b.		·	0.00	\$		N/A	_
	5c.	Voluntary contributions for retirement plans	5c.		: ———	0.00	\$		N/A	_
	5d.	Required repayments of retirement fund loans	5d.	. :		0.00	\$		N/A	_
	5e.	Insurance	5e.	. ;	\$	0.00	\$		N/A	
	5f.	Domestic support obligations	5f.			0.00	\$		N/A	_
	5g.	Union dues	5g.			0.00	\$		N/A	
	5h.	Other deductions. Specify:	5h.	.+ :	\$	0.00	+ \$		N/A	<u>\</u>
6.	Add	I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	9	§	0.00	\$		N/A	<u> </u>
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	9	§	0.00	\$		N/A	<u> </u>
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	. ;	\$	0.00	\$		N/A	
	8b.	Interest and dividends	8b.	. ;		0.00	\$		N/A	_
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	. :	\$	0.00	\$		N/A	
	8d.	Unemployment compensation	8d.	. ;		0.00	\$		N/A	
	8e.	Social Security	8e.	. ;	\$ 2,170	0.00	\$		N/A	<u> </u>
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.			0.00	\$		N/A	
	8g. 8h.	Pension or retirement income	8g. 8h.			0.00	—		N/A N/A	_
	OII.	Other monthly income. Specify:	011.	· † · `	Φ	0.00	+ • —		IN/A	<u></u>
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	2,740	0.00	\$		N/	A
10	Cal	culate monthly income. Add line 7 + line 9.	10.	\$	2,740.00	+ \$		N/A	= \$	2,740.00
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		–	2,1 40.00				* -	2,7 40.00
11.	Incl othe Do	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not acify:	depe		. ,		•	chedule 11.		0.00
12.		If the amount in the last column of line 10 to the amount in line 11. The reside that amount on the Summary of Schedules and Statistical Summary of Certainlies						12.	\$	2,740.00
13.	Do	you expect an increase or decrease within the year after you file this form	?					·	Combi month	ned ly income
		No.								1

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 :11	in this information to identify your again				
FIII	in this information to identify your case:				
Deb	Michael W Hansen		Che	ck if this is:	
				An amended filing	
	ouse, if filing)			A supplement show 13 expenses as of t	ving postpetition chapter
(Opt	ouse, ii ming)			10 expenses as on	ine following date.
Unit	ited States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS	<u> </u>	•	MM / DD / YYYY	
Cas	se number				
(lf kı	known)				
Of	fficial Form 106J				
Sc	chedule J: Your Expenses				12/15
Be info	as complete and accurate as possible. If two married people are fi ormation. If more space is needed, attach another sheet to this for mber (if known). Answer every question.				r supplying correct
	rt 1: Describe Your Household				
1.	Is this a joint case?				
	■ No. Go to line 2.				
	☐ Yes. Does Debtor 2 live in a separate household?				
	□ No				
	☐ Yes. Debtor 2 must file Official Form 106J-2, Expenses for	r Separate House	hold of Deb	tor 2.	
2.	Do you have dependents? ■ No				
		Dependent's relation	onahin ta	Dependent's	Does dependent
		Debtor 1 or Debtor		age	live with you?
	Do not state the				□ No
	Do not state the dependents names.				☐ Yes
	-				□ No
					☐ Yes
	-				□ No
					☐ Yes
	-				□ No
					☐ Yes
3.	Do your expenses include ■ No				
	expenses of people other than yourself and your dependents?				
	yoursen and your dependents:				
	rt 2: Estimate Your Ongoing Monthly Expenses				
exp	timate your expenses as of your bankruptcy filing date unless you penses as of a date after the bankruptcy is filed. If this is a suppler plicable date.				
	clude expenses paid for with non-cash government assistance if you explain the same as a sistance and have included it on Schedule I: You				
	fficial Form 106I.)	ii iiicome		Your expe	enses
·	,				
4.	The rental or home ownership expenses for your residence. Including payments and any rent for the ground or lot.	ude first mortgage	4. 9	B	1,509.00
	If not included in line 4:				
	4a. Real estate taxes		4a. \$	6	0.00
	4b. Property, homeowner's, or renter's insurance		4b. \$	·	0.00
	4c. Home maintenance, repair, and upkeep expenses		4c. \$		0.00
	4d. Homeowner's association or condominium dues		4d. \$		0.00
5.	Additional mortgage payments for your residence, such as home	equity loans	5. \$	5	0.00

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ebtor 1	Michael W Hansen	Case numl	ber (if known)	
. Utilitie	ae.			
	Electricity, heat, natural gas	6a.	\$	222.00
	Water, sewer, garbage collection	6b.	\$	73.00
	Telephone, cell phone, Internet, satellite, and cable services	6c.	·	118.00
	Other. Specify:	6d.	·	0.00
	and housekeeping supplies	7.	\$	400.00
	care and children's education costs	7. 8.	\$	
-		o. 9.	·	0.00
	ing, laundry, and dry cleaning		\$	0.00
	nal care products and services	10.	\$	0.00
	al and dental expenses	11.	\$	77.00
	portation. Include gas, maintenance, bus or train fare.	12.	\$	189.00
	t include car payments.		·	
	tainment, clubs, recreation, newspapers, magazines, and books	13.	· -	0.00
	table contributions and religious donations	14.		0.00
5. Insura				
	t include insurance deducted from your pay or included in lines 4 or 20.	150	¢	0.00
	Life insurance	15a.		0.00
	Health insurance	15b.	·	0.00
	Vehicle insurance	15c.		128.00
	Other insurance. Specify:	15d.	\$	0.00
	Do not include taxes deducted from your pay or included in lines 4 or 20.			
Specif	•	16.	\$	0.00
	Iment or lease payments:			
17a.	Car payments for Vehicle 1	17a.	\$	0.00
17b.	Car payments for Vehicle 2	17b.	\$	0.00
17c.	Other. Specify:	17c.	\$	0.00
17d.	Other. Specify:	17d.	\$	0.00
	payments of alimony, maintenance, and support that you did not report as	 S	·	
	ted from your pay on line 5, Schedule I, Your Income (Official Form 106I).		\$	0.00
	payments you make to support others who do not live with you.		\$	0.00
Specif	y:	19.		
). Other	real property expenses not included in lines 4 or 5 of this form or on Sch	edule I: Yo	ur Income.	
	Mortgages on other property	20a.		0.00
	Real estate taxes	20b.	\$	0.00
20c.	Property, homeowner's, or renter's insurance	20c.	\$	0.00
	Maintenance, repair, and upkeep expenses	20d.	•	0.00
	Homeowner's association or condominium dues	20e.		0.00
			·	
. Otner:	: Specify:	21.	+⊅	0.00
2. Calcu	late your monthly expenses			
	add lines 4 through 21.		\$	2,716.00
	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	_,,,,,,,,,
			·	0.740.00
∠∠C. A	dd line 22a and 22b. The result is your monthly expenses.		\$	2,716.00
3. Calcu	late your monthly net income.		<u> </u>	
	Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	2,740.00
	Copy your monthly expenses from line 22c above.	23b.	·	2,716.00
۷۵۵.	Copy your monthly expenses from the 226 above.	250.	Ψ	2,110.00
220	Subtract your monthly expenses from your monthly income.			
	The result is your monthly net income.	23c.	\$	24.00
	The result of your monthly not moonle.			
4. D ο νο	u expect an increase or decrease in your expenses within the year after y	ou file this	form?	
	ample, do you expect to finish paying for your car loan within the year or do you expect you			or decrease because of
	ation to the terms of your mortgage?	0 0 1	-	
■ No.				

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Fill in this inform	nation to identify your	case:			
Debtor 1	Michael W Hanse				
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	nkruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number					☐ Check if this is an amended filing
Official Forn	n 106Dec				
Declarat	ion About a	n Individual	Debtor's Sc	hedules	12/15
years, or both. 18	n Below		rupicy case can result i	iii iiiles up to \$250,000), or imprisonment for up to 20
Did you pa	y or agree to pay some	one who is NOT an attorr	ney to help you fill out b	pankruptcy forms?	
■ No					
☐ Yes. N	lame of person				ruptcy Petition Preparer's Notice, and Signature (Official Form 119)
	Ity of perjury, I declare e true and correct.	that I have read the sumr	nary and schedules file	ed with this declaration	n and
X /s/ Micl	hael W Hansen		X		
Michae	el W Hansen re of Debtor 1		Signature of	Debtor 2	

Date _____

Date July 11, 2016

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Filli	in this infor	mation to identify you	ır case:					
Deb	tor 1	Michael W Hans	sen					
		First Name	Middle Name	L	ast Name			
	tor 2 use if, filing)	First Name	Middle Name	L	ast Name			
Unit	ed States Ba	ankruptcy Court for the	NORTHERN DISTRICT	OF ILLIN	OIS			
Case (if kno	e number _							heck if this is an mended filing
Sta Be as infor	s complete mation. If n	and accurate as poss nore space is needed	Affairs for Indivisible. If two married people, attach a separate sheet to	are filing	together, both are	equally respons	sible for sup	
numl		n). Answer every que	estion. arital Status and Where Yo	ıı l ived F	efore			
				u Liveu L	eiore			
1.	wnat is you	r current marital stat	us?					
	■ Married□ Not ma							
2.	During the	ast 3 years, have you	ı lived anywhere other than	where y	ou live now?			
	■ No							
	_	st all of the places you	lived in the last 3 years. Do r	not include	where you live now	٧.		
	Debtor 1 P	rior Address:	Dates Debtor 1 lived there	I	Debtor 2 Prior Ac	ldress:		Dates Debtor 2 lived there
			ver live with a spouse or le alifornia, Idaho, Louisiana, No					
	■ No □ Yes. M	ake sure you fill out <i>Sc</i>	hedule H: Your Codebtors (C	Official Fo	m 106H).			
Part	2 Expla	in the Sources of Yo	ur Income					
	Fill in the tot If you are fili	al amount of income yo	mployment or from operation received from all jobs and a have income that you receive	all busine	sses, including part	-time activities.	evious caler	ndar years?
	■ No □ Yes. Fi	Il in the details.						
			Debtor 1			Debtor 2		
			Sources of income Check all that apply.	(before	s income re deductions and sions)	Sources of in Check all that		Gross income (before deductions and exclusions)

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Case number (if known) Document

Debtor 1 Michael W Hansen

5.	Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1.									
	List each	source and the	gross income	from each source sepa	arately. Do not include income th	at you listed in line 4.				
		·		·	,	·				
	□ No									
	■ Yes.	Fill in the details	S.							
			De	btor 1		Debtor 2				
				urces of income scribe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income (before deductions and exclusions)			
		y 1 of current ye filed for bankru		ocial Security	\$15,190.00					
				ension/Annuity stribution	\$3,990.00					
	or last caler anuary 1 to	ndar year: December 31,	2015)	ocial Security	\$26,040.00					
				ension/Annuity stribution	\$6,840.00					
		dar year before December 31,		ocial Security	\$26,040.00					
				ension/Annuity stribution	\$6,840.00					
Pa	rt 3: Lis	t Certain Payme	ents You Mad	de Before You Filed fo	or Bankruptcy					
S.	Are eithe ☐ No.	Neither Debto	or 1 nor Debt	ebts primarily consur or 2 has primarily cor sonal, family, or house	nsumer debts. Consumer debts	are defined in 11 U.S.C. §	3 101(8) as "incurred by an			
			days before y o to line 7.	ou filed for bankruptcy	, did you pay any creditor a total	of \$6,425* or more?				
		pa	aid that credito	or. Do not include payn	paid a total of \$6,425* or more in nents for domestic support obliga or this bankruptcy case.					
		* Subject to a	djustment on	4/01/19 and every 3 ye	ears after that for cases filed on o	or after the date of adjustm	nent.			
	■ Yes.			oth have primarily cor	nsumer debts. , did you pay any creditor a total	of \$600 or more?				
		J	22,0 001010 y	ou mou for burningley	, a.a , oa pa, any oroanor a totar	5. \$500 of more:				
		□ No. Go	o to line 7.							
		ind	clude paymer	,	paid a total of \$600 or more and t obligations, such as child supp	, ,				

Total amount

paid

Amount you

still owe

Dates of payment

Creditor's Name and Address

Was this payment for ...

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	Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this pa	yment for
	Advance America Attn: Bankrutcy Dept 1746 South State Street Belvidere, IL 61008		\$900.00	\$1,132.00	☐ Mortgage ☐ Car ☐ Credit Ca ■ Loan Rep ☐ Suppliers ☐ Other	ard payment
7.	Within 1 year before you filed for bankrupto Insiders include your relatives; any general pa of which you are an officer, director, person in a business you operate as a sole proprietor. 1 alimony.	rtners; relatives of any gen control, or owner of 20% o	eral partners; partners of their voting	erships of which yog g securities; and a	ou are a genera ny managing a	al partner; corporations gent, including one for
	■ No					
	Yes. List all payments to an insider. Insider's Name and Address	Dates of payment	Total amount	Amount you	Reason for	this payment
			paid	still owe		
8.	Within 1 year before you filed for bankrupto insider? Include payments on debts guaranteed or cos		ments or transfer a	any property on a	ccount of a de	ebt that benefited an
	■ No					
	☐ Yes. List all payments to an insider					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for Include cred	this payment litor's name
Par	t 4: Identify Legal Actions, Repossession	s. and Foreclosures				
9.	Within 1 year before you filed for bankrupto List all such matters, including personal injury modifications, and contract disputes. No Yes. Fill in the details.				actions, suppor	t or custody
	Case title Case number	Nature of the case	Court or agency		Status of th	e case
10.	Within 1 year before you filed for bankrupto Check all that apply and fill in the details below No. Go to line 11. Yes. Fill in the information below.	cy, was any of your prope √.	erty repossessed, f	oreclosed, garnis	shed, attached	d, seized, or levied?
	Creditor Name and Address	Describe the Property		Date		Value of the
		Explain what happened	I			property
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment beca ■ No □ Yes. Fill in the details.	etcy, did any creditor, incl		nancial institution	n, set off any a	amounts from your
	Creditor Name and Address	Describe the action the	creditor took	Date taker	action was	Amount
12.	Within 1 year before you filed for bankrupto court-appointed receiver, a custodian, or at No Yes		erty in the possess	ion of an assigne	e for the bene	efit of creditors, a

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Pai	t 5: List Certain Gifts and Contributions			
13.	Within 2 years before you filed for bankrupt ■ No □ Yes. Fill in the details for each gift.	cy, did you give any gifts with a total value of more t	han \$600 per person	?
	Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift and Address:	Describe the gifts	Dates you gave the gifts	Value
14.	Within 2 years before you filed for bankrupt No	cy, did you give any gifts or contributions with a tot	al value of more than	\$600 to any charity?
	☐ Yes. Fill in the details for each gift or cont Gifts or contributions to charities that tota more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)		Dates you contributed	Value
Pai	t 6: List Certain Losses			
15.	Within 1 year before you filed for bankruptor gambling? No Yes. Fill in the details.	ry or since you filed for bankruptcy, did you lose any	thing because of the	ft, fire, other disaster,
	Describe the property you lost and how the loss occurred	escribe any insurance coverage for the loss clude the amount that insurance has paid. List pending surance claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost
Pai	t 7: List Certain Payments or Transfers			
16.	Within 1 year before you filed for bankrupto consulted about seeking bankruptcy or pre	cy, did you or anyone else acting on your behalf pay paring a bankruptcy petition? parers, or credit counseling agencies for services require		rty to anyone you
	□ No■ Yes. Fill in the details.			
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
	Springer Law Firm 2222 E State St, Suite 107 Rockford, IL 61104	Legal Fees	07/2016	\$500.00
17.	Within 1 year before you filed for bankrupto promised to help you deal with your credito Do not include any payment or transfer that yo		or transfer any prope	rty to anyone who
	■ No □ Yes. Fill in the details.			
	Person Who Was Paid Address	Description and value of any property transferred	Date payment or transfer was made	Amount of payment

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Debtor 1 Michael W Hansen

18.	Within 2 years before you filed for bankruptcy transferred in the ordinary course of your bus Include both outright transfers and transfers madinclude gifts and transfers that you have already Include yes. Fill in the details.	siness or financial affa e as security (such as	airs? the granting of a			
	Person Who Received Transfer Address Person's relationship to you	Description and very property transfer		payme	be any property or nts received or debts exchange	Date transfer was made
19.	Within 10 years before you filed for bankrupto beneficiary? (These are often called asset-prote No Yes. Fill in the details.		ny property to a	self-settled	l trust or similar device o	of which you are a
	Name of trust	Description and	value of the prop	perty trans	ferred	Date Transfer was made
Pai	t 8: List of Certain Financial Accounts, Instr	uments, Safe Deposi	t Boxes, and Sto	orage Units	3	
20.	Within 1 year before you filed for bankruptcy, sold, moved, or transferred? Include checking, savings, money market, or houses, pension funds, cooperatives, association No	other financial accou	nts; certificates	of deposit		
	Name of Financial Institution and	ast 4 digits of account number	Type of accou	int or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
21.	cash, or other valuables?	ar before you filed fo	r bankruptcy, ar	ıy safe dep	osit box or other deposi	tory for securities,
	□ No ■ Yes. Fill in the details.					
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S		Describe t	he contents	Do you still have it?
		State and ZIP Code)	Street, City,			nave it:
	Bank of America 4161 Piedmont Pkwy Greensboro, NC 27410			Empty		□ No ■ Yes
22.	Have you stored property in a storage unit or No	place other than you	r home within 1	year before	e you filed for bankrupto	y?
	Yes. Fill in the details.	Who else has or	had access	Deceribe t	he contents	Do you still
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	to it? Address (Number, State and ZIP Code)		Describe t	ne contents	Do you still have it?
Pa	t 9: Identify Property You Hold or Control fo	r Someone Else				
23.	Do you hold or control any property that some for someone.	eone else owns? Incl	ude any propert	y you borr	owed from, are storing fo	or, or hold in trust
	■ No □ Yes. Fill in the details.					
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		Describe t	he property	Value
		- · · · · · /				

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Debtor 1 Michael W Hansen

Part 10: Give Details About Environmental Information

For the purpose of Part 10, the following definitions apply:

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.

		eans any location, facility, or property , operate, or utilize it, including dispo	y as defined under any environmental losal sites.	aw, whether	you now own, operate,	or utilize it or used	
		<i>lous material</i> means anything an env ous material, pollutant, contaminant	ironmental law defines as a hazardous or similar term.	waste, haza	rdous substance, toxic	substance,	
Rep	ort all n	otices, releases, and proceedings th	at you know about, regardless of wher	they occurr	ed.		
24.	Has an	y governmental unit notified you tha	you may be liable or potentially liable	under or in	violation of an environm	ental law?	
	■ No	o es. Fill in the details.					
		of site SS (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)		mental law, if you	Date of notice	
25.	Have y	ou notified any governmental unit of	any release of hazardous material?				
	■ No	o es. Fill in the details.					
		of site SS (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)		mental law, if you	Date of notice	
26.	Have y	ou been a party in any judicial or adr	ninistrative proceeding under any envi	onmental la	w? Include settlements	and orders.	
	■ No	o es. Fill in the details.					
	Case I	Title Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of th	ie case	Status of the case	
Pa	rt 11:	Give Details About Your Business or	Connections to Any Business				
27.	Within	4 years before you filed for bankrupt	cy, did you own a business or have an	y of the follo	wing connections to an	y business?	
	☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time						
	☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)						
	☐ A partner in a partnership						
	☐ An officer, director, or managing executive of a corporation						
	☐ An owner of at least 5% of the voting or equity securities of a corporation						
	■ No	o. None of the above applies. Go to F	Part 12.				
	□ Ye	es. Check all that apply above and fill	in the details below for each business	-			
		ess Name	Describe the nature of the business		yer Identification number		
	Addre (Number	SS r, Street, City, State and ZIP Code)	Name of accountant or bookkeeper		t include Social Security business existed	number or ITIN.	

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☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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Fill in this info	rmation to identify yo	our case:		
Debtor 1	Michael W Han	nsen		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States B	ankruptcy Court for the	e: NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				☐ Check if this is an amended filing
Official Fo	orm 108			
		ion for Individu	uals Filing Under Chapte	ar 7
Glateme	iii oi iiiteiit	ion for individu	ais i illig olider chapte	?
f var are an inc	dividual filing under e	chapter 7, you must fill out t	this form if	

you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1:	List Your	Creditors	Who Have	Secured	Claims
---------	-----------	-----------	----------	---------	--------

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?	
Creditor's BMW Financial	■ Surrender the property.	■ No	
name: Description of 2007 Mercedes C280 147,000	 □ Retain the property and redeem it. □ Retain the property and enter into a Reaffirmation Agreement. 	□Yes	
property miles securing debt: Car	☐ Retain the property and [explain]:		
Creditor's Nationstar Mortgage LLC name:	☐ Surrender the property. ☐ Retain the property and redeem it.	□No	
Description of property IL 61008 Boone County	Retain the property and enter into a Reaffirmation Agreement.	■ Yes	
securing debt:	☐ Retain the property and [explain]:		

Part 2: List Your Unexpired Personal Property Leases

For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

Describe your unexpired personal property leases

Will the lease be assumed?

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Debtor 1 Michael W Hansen	Case number (if known)
Lessor's name: Description of leased Property:	□ No
Lessor's name: Description of leased Property:	□ No
Lessor's name: Description of leased Property:	□ No □ Yes
Lessor's name: Description of leased Property:	□ No
Lessor's name: Description of leased Property:	□ No □ Yes
Lessor's name: Description of leased Property:	□ No □ Yes
Lessor's name: Description of leased Property:	□ No □ Yes
Part 3: Sign Below	
Under penalty of perjury, I declare that I have indicated my intention about any property that is subject to an unexpired lease.	y property of my estate that secures a debt and any personal
X /s/ Michael W Hansen X Michael W Hansen Signature of Debtor 1	nature of Debtor 2
Date July 11, 2016 Date	

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 16-81657 Doc 1 Filed 07/11/16 Entered 07/11/16 15:23:03 Desc Main Document Page 47 of 52

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of Illinois

In re	Michael W Hansen		Case No.	
		Debtor(s)	Chapter	7
	DISCLOSURE OF COMPE	ENSATION OF ATTOR	RNEY FOR DE	EBTOR(S)
	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2010 compensation paid to me within one year before the filible rendered on behalf of the debtor(s) in contemplation	ing of the petition in bankruptcy,	or agreed to be paid	to me, for services rendered or to
	For legal services, I have agreed to accept		\$	500.00
	Prior to the filing of this statement I have received		\$	500.00
	Balance Due		\$	0.00
2. ′	The source of the compensation paid to me was:			
	■ Debtor □ Other (specify):			
3.	The source of compensation to be paid to me is:			
	■ Debtor □ Other (specify):			
4.	■ I have not agreed to share the above-disclosed com	pensation with any other person	unless they are mem	bers and associates of my law firm.
	☐ I have agreed to share the above-disclosed compens copy of the agreement, together with a list of the na			
5.	In return for the above-disclosed fee, I have agreed to r	render legal service for all aspect	s of the bankruptcy c	ase, including:
1	a. Analysis of the debtor's financial situation, and rend b. Preparation and filing of any petition, schedules, sta c. Representation of the debtor at the meeting of credit d. [Other provisions as needed] Negotiations with secured creditors to reaffirmation agreements and applications and applications of the secured creditors of the secured creditors to reaffirmation agreements and applications are secured creditors on how the secured creditors to reaffirmation agreements and applications on how the secured creditors of the secured creditors are secured creditors.	atement of affairs and plan which tors and confirmation hearing, an reduce to market value; exe ons as needed; preparation	may be required; and any adjourned hea emption planning;	rings thereof; preparation and filing of
6.	By agreement with the debtor(s), the above-disclosed for Representation of the debtors in any diany other adversary proceeding.			es, relief from stay actions or
		CERTIFICATION		
	I certify that the foregoing is a complete statement of an anarcuptcy proceeding.	ny agreement or arrangement for	payment to me for re	epresentation of the debtor(s) in
J	uly 11, 2016	/s/ Daniel A. Sprir	nger	
\overline{D}	ate	Daniel A. Springe Signature of Attorne Springer Law Fire 2222 E State St Suite 107 Rockford, IL 6110 815.312.4725	y m 04	
		dspringerlaw@gr Name of law firm	iiaii.coiii	

Springer Law Firm

2222 East State St. # 107, Rockford, IL

815.312.4275

CHAPTER 7 RETAINER AGREEMENT

The undersigned agrees to hire Springer Law Firm to represent the undersigned in a Chapter 7 bankruptcy and agrees to the following terms and conditions:

- The attorney fees for the Chapter 7 bankruptcy are \$500. This is a flat fee arrangement, and does not
 include the court costs, which are currently \$335. This is the total of your attorney fees, and Springer Law
 Firm will not charge you for additional work. However, if you refuse to cooperate, or fail to provide
 information as requested by our attorney, your case may be closed.
- 2. Fees paid to the firm become property of the firm upon payment. If before the case is filed, you decide to close out your case, Springer Law Firm will refund you any fees not earned. I assign to Springer Law Firm any amount paid towards court costs and filing fees. I authorize Springer Law Firm to transfer said funds to the firm's operating account if I decide not to file for bankruptcy, or if I breach this contract.
- 3. I agree to disclose all pertinent information to Springer Law Firm, so that the firm can properly disclose all my assets, debts, and financial history to the court. I agree to keep the firm informed on any new assets or debts I may incur from this date forward. If I do not provide the proper information, or do not cooperate with Springer Law Firm, said firm may withdraw from representation, with permission of the court.
- 4. I understand that I may not be able to protect all of my property. The bankruptcy code does not provide exemptions for everything, and as such, some of my property may be taken by the Trustee and sold.

 Additionally, if my income is too high, or if my income is not offset enough by my expenses, I understand that the Trustee may dismiss my case, or require me to file a Chapter 13 instead of a Chapter 7.
- 5. I understand that not all of my debts may be discharged in a Chapter 7 bankruptcy. Student loans, educational debts, undisclosed debt, support/maintenance, fines, debts incurred by fraud, future association/condo HOA dues, certain tax debts, or debts found non-dischargeable by a Judge are among the debts not dischargeable.
- 6. I understand that this retainer agreement is for bankruptcy representation only. Springer Law Firm will not represent me in any other case or legal matter, unless agreed to in a separate retainer agreement. This includes adversary proceedings that may fall under the bankruptcy case. This agreement does not include representation in such adversary proceedings.
- 7. I understand that all money paid towards attorney fees is non-refundable. I understand that once I pay Springer Law, that Springer Law begins work on my case. I understand that the majority of bankruptcy work is done prior to the filing of the case, and because of this the fees are earned even before the filing of the case.
- 8. I understand that before I transfer or sell any property, or incur any new debt, I will first notify Springer Law Firm and consult on the impact such action will have on my bankruptcy.
- 9. I understand that I must take 2 classes pertaining to financial management and credit counselling. Failure to take these courses will result in either my case NOT being filed, or if filed, possibly dismissed. If my case is dismissed, I understand that I will have to pay to have my case re-opened by Springer Law Firm.

10. I have received the 11 U.S.C. § 527(a) disclosures and have read them.

Dated: 7/5/2016
Signature Michael Musen
Print Name: MICHAEL W. HANSEN

Attorney Print:

United States Bankruptcy Court Northern District of Illinois

In re	Michael W Hansen		Case No.	
		Debtor(s)	Chapter	7
	VERIFICATION OF CREDITOR MATRIX			
		Number of Creditors: 23		
	The above-named Debtor(s) (our) knowledge.	hereby verifies that the list of creditor	rs is true and	correct to the best of my
Date:	July 11, 2016	/s/ Michael W Hansen Michael W Hansen Signature of Debtor		

Advance America Attn: Bankrutcy Dept 1746 South State Street Belvidere, IL 61008

Afni Attn: Bankruptcy Dept. PO Box 3097 Bloomington, IL 61702-3097

AT&T Mobility Attn: Bankruptcy Dept. PO Box 536216 Atlanta, GA 30353-6216

BMW Financial PO BOX 3608 Dublin, OH 43016

Citizens Finance Attn: Bankruptcy Dept. 6457 N 2nd St Loves Park, IL 61111

Comcast Attn: Bankruptcy Dept. PO Box 3005 Southeastern, PA 19398

Creditors Protection Service Attn: Bankruptcy Dept. PO Box 4115 Rockford, IL 61101

Dish Network LLC Attn: Bankruptcy Dept. 9601 S Meridian Blvd Englewood, CO 80112-5905

Enhanced Recovery Company Attn: Bankruptcy Dept. PO Box 57547 Jacksonville, FL 32241 EOS CCA PO BOX 981008 Boston, MA 02298

First Premier Bank Attn: Bankruptcy Dept. 3820 N Louise Ave Sioux Falls, SD 57107

IGS Energy/ Recovery One 5100 ParkCenter Ave Dublin, OH 43017

IRS Centralized Insolvency Operation PO Box 7346 Philadelphia, PA 19101-7346

Lifeline Abmbulance 318 Roxbury Road Rockford, IL 61107

Nationstar Mortgage LLC 8950 Cypress Waters Blvd. Coppell, TX 75019

Nicor Gas P.O. Box 2020 Aurora, IL 60507

OSF St. Anthony Med Center Attn: Bankruptcy Dept. 5510 East State St. Rockford, IL 61108-2381

Rockford Anesthesiologists PO Box 4569 Rockford, IL 61110

Rockford Mercantile Agency Attn: BAnkruptcy Dept. PO Box 5847 Rockford, IL 61125 Shelia Hansen 2924 Rural Street Rockford, IL 61107

Sprint Nextel Attn: Bankruptcy Dept. 6100 Corporate Blvd Suite 250 Baton Rouge, LA 70808

Superior Ambulance Service PO BOX 1407 Elmhurst, IL 60126

Swedish American Hospital Attn: Bankruptcy Dept. PO Box 950 Waukegan, IL 60085